BUREAU OF HEALTH FACILITY LICENSURE

File No._____

REQUEST FOR AGENCY ACTION/VARIANCE APPLICATION
Specific to Child Care Background Clearance

In accordance with Title 26, Chapter 39, Utah Code Annotated and Rule 430-6, Utah Department of Health Rules for child care facilities and residential certificates, a request for agency action is made for a variance to licensing rule(s) and/or standards.

I. IDENTIFYING INFORMATION:

1   NAME OF FACILITY _____ TELEPHONE_____

     ADDRESS _____

     CITY, STATE, ZIP _____

2. Is the facility currently licensed?   Yes _____   No _____
    EXPIRATION DATE _____
    ANTICIPATED APPLICATION DATE _____

3. Rule (include title and section) from which the variance is being requested:

    R430-6

4. Individual for whom the variance is requested:_____

5. Time period for which the variance is requested:_____

II. FACTS FORMING BASIS FOR VARIANCE:

5. The specific alternative arrangement proposed if any:

6. The specific reason for the request including why compliance with the rule cannot be accomplished (use additional sheet if necessary)

(Complete other side)

7. Explain how the health, safety, and welfare of all children in your care will be maintained if the variance request is granted.

8. If the variance involves the physical structure, equipment, or life safety features. Describe the specific location within the facility in which the variance will be utilized.

III. NOTIFICATION OF INTERESTED PARTIES:
This request for variance has been mailed to the following parties:

NAME	**ADDRESS**

(Attach additional sheets if necessary)

IV. CERTIFICATION OF REQUEST:

Name	Title
Signature	Date Mailed